

## PERSONAL INFORMATION NOTICE

Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code Sections 1798, et. seq.), notice is hereby given for the request of personal information by this form. The requested personal information is voluntary. The principal purpose of the voluntary information is to facilitate the processing of this form. The failure to provide all or any part of the requested information may delay processing of this form. No disclosure of personal information will be made unless permissible under Article 6, Section 1798.24 of the IPA of 1977. Each individual has the right upon request and proper identification, to inspect all personal information in any record maintained on the individual by an identifying particular. Direct any inquiries on information maintenance to the IPA Officer.

	<del></del>				
1. NAME OF FIRM	2. FILE NUMBER	•			
FIRM'S ADDRESS (Physical)	CITY	STAT	E ZIP CODE		
FIRM'S ADDRESS (Mailing)	CITY	STAT	E ZIP CODE		
3. MAJORITY OWNER(S)	4. BUSINESS PHONE	,	BUSINESS FAX		
5. IS THE BUSINESS STREET ADDRESS OR PHONE NUMBER THE SAME	AS THE RESIDENCE?		YES NO		
6. HAS THE OWNERSHIP OR CONTROL OF THE COMPANY CHANGED?			YES NO		
If Yes, please call the phone number below to obtain a complete Certification A	application or access Caltrans	s' Internet Addre	ess at:		
www.dot.ca.gov/hg/bep to download the application.			CONTROL OF CURPOSITION AND A LOST OF CO.		
7. NAME OF LICENSEE	LICENSE NUMBER – PI		T COPY OF CURRENT LICENSE(S)		
8. INDICATE THE COMPANY'S GROSS RECEIPTS FOR THE LAST YEAR:		YEAR ENDII	DING		
		<b>S</b>			
9. NUMBER OF CURRENT EMPLOYEES:		FULL TIME	PART TIME		
10. DOES THE COMPANY SHARE SPACE, EMPLOYEES, EQUIPMENT OR		IF YE	S, EXPLAIN IN A SEPARATE		
FINANCING WITH ANY OTHER COMPANY?	YES N		TTACHMENT		
11. HAVE THE OFFICEHOLDERS OF THE COMPANY CHANGED?		IF YE	S, EXPLAIN IN A SEPARATE ITACHMENT		
12. HAS THE BOARD OF DIRECTORS CHANGED? YES NO	NAME OF CHAIRMAN				
13. Are you currently certified with any other agencies as a DBE?	YES N	NO If yes	, attach copy(ies) of certificate(s)		
14. SUBMIT THE FOLLOWING DOCUMENTS FOR: (Failure to submit documents requested with this application may result in the expiration of your certification)					
SOLE PROPRIETOR: MOST RECENTLY FILED 1040 TAX FORM WITH	I ALL SCHEDULES				
PARTNERSHIP: 1) MOST RECENTLY FILED 1065 TAX FORM; 2) MOST RECENTLY FILED 1040 TAX FORMS WITH ALL SCHEDULES; & 3) MINUTES					
ORPORATION: 1) MOST RECENTLY FILED 1120 TAX FORM; 2) MOST RECENTLY FILED 1040 TAX FORMS WITH ALL SCHEDULES; & 3) MINUTES					
LIMITED LIABILITY CO. 1) MOST RECENTLY FILED 1065/1120 TAX FORMS; 2) MOST RECENTLY FILED 1040 TAX FORMS WITH ALL SCHEDULES; & 3) MINUTES					
15. The undersigned swears, under perjury, that the foregoing statements are true a	nd correct and further states	that he/she is pro	operly authorized by,		
Name of Firm	to execute the affidavi	t and does so se	his/her free act and deed.		
PRINTED NAME	SIGNATURE	tt and does so as	insher free act and deca-		
TITLE			DATE		
ΝΟΤ	ARY				
The foregoing affidavit was subscribed and sworn to me before me on this day of, by					
NAME					
NOTARY PUBLIC	COM	MISSION EXPI	RES		
			-0.05		

Mail completed application and supporting documentation to:

NOTARY PUBLIC SEAL

SACRAMENTO, CA 95814



## PERSONAL NET WORTH STATEMENT

UNIFIED CERTIFICATION PROGRAM				***************************************	
Complete this form for: (1) each proprietor, or (2) e 20% or more of voting stock, or (4) any person or e	each limited partner who overtity providing a guaranty	vns 20% or more inter on the loan.	est and each general p	partner, or (3) eac	h stockholder owning
Name	Business Phone				
Residence Address	Residence Phone				
City, State, & Zip Code	hali haka hali hali hali hali hali hali hali da mana kan kan kan kan kan kan kan kan kan	MET MINISTER SECURITY OF THE PROPERTY AS A SECURITY AND A SECURITY AS A SECURITY AS A SECURITY AS A SECURITY A	n bloke file freih een fer een een ren henre mermann een een stat 111 in een tat 111 in een tat 111 in een te	a electrica e electrica e en el comunidar el de colonica el de colonica el constitución e e el colonica el de c	2004 (148 MIRA) 100 MIRA) (148 MIRA) 148 (148 MIRA) 148 MIRA) 148 MIRA) 148 MIRA) 148 MIRA) 148 MIRA) 148 MIRA)
Business Name of Applicant/Borrower		THE RESERVE OF THE PARTY OF THE	THE STATE STATES OF STATES OF STATES		9999 118919 11939 - 1316 - 1316 11 11 11 11 11 14 14 14 14 14 14 14 14
ASSETS	(Omit Cents)		LIABI	LITIES	(Omit Cents)
Cash on hand & in Banks Savings Accounts IRA or Other Retirement Account Accounts & Notes Receivable	\$ \$	Installment Account (Auto) \$			0000 A WARRAN AND AND AND AND AND AND AND AND AND A
Life Insurance-Cash Surrender Value Only (Complete Section 8)  Stocks and Bonds (Describe in Section 3)	\$	Installment Accou Mo. Payments Loan on Life Insur	Mo. Payments \$ Installment Account (Other) \$ Mo. Payments \$ Loan on Life Insurance \$		
(Describe in Section 4)  Automobile-Present Value Other Personal Property (Describe in Section 5)	\$	Mortgages on Real Estate \$			
Other Assets (Describe in Section 5)  Total	\$	(Describe in Section 7)  Total Liabilities			
Section 1. Source of Income		Contingent Liabi	lities		
Salary Net Investment Income Real Estate Income Other Income (Describe below)* Description of Other Income in Section 1.	\$ \$	As Endorser or Co Legal Claims & Ju Provision for Fede	o-Maker	\$_ \$_ \$_	
Alimony or child support payments need not be disclos Section 2. Notes Payable to Banks and Others.	ed in "Other Income" unless i				ement and signed.)
Name and Address of Noteholder(s)	Original C Balance Be	urrent Payment alance Amount	Frequency (monthly,etc.)	How Secur Type o	ed or Endorsed f Collateral
	. 1		1		

Number of Shares	Nam	e of Securities	Cost		Market Value	Date of	Total Value
(Williper of Grideo.	f Teace in	8 Of Decrinics	003.		Quotation/Exchange	Quotation/Exchange	10tar value
							VIII MAILLI MAIN A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A
**/*********************************							1A
		MATERIAL PROMINENTS OF STREET					
Section 4. Real E	1-1-0	(List each parcel separate	h. Hea attachn	mont if ne	neesan/ Fach attacl	mont must be identified	as a nad
Section 4. Inva.	state Owneo.	of this statement and sign	ned.)	Hen and			
		Property A			Property B	Р	roperty C
Type of Property							
* * 1						. Control of the cont	
Address			-			Vaccati i manneta	
Date Purchased							MANUAL MA
Original Cost		THE SECRET LABORATE LABORATE AND ADDRESS A					
Present Market Va	ilue		Į				
Name &							
Address of Mortga	ge Holder					***************************************	
** + Account		***************************************		LATA BRANCH SALVERA		***************************************	
Mortgage Account						1	
Mortgage Balance		1	1				
Mortgage Balance  Amount of Paymer	nt per Month/Year					i	
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## PERSONAL FINANCIAL STATEMENT NOTARY ACKNOWLEDGEMENT

STATE OF	
COUNTY OF	
On this day of Public, personally appeared_	,, before me, the undersigned Notary
personally known to me (or proved to me on the ba	asis of satisfactory evidence) to be the person(s) whose and acknowledged that he/she/they executed the same in er/their signature on the instrument, the person(s)
WITNESS my hand and Official Seal.	
Signature:	
Name:	
(Typed or Printed)	